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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | ☐ Chapter 12 ☐ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | | | | |
|--|----------------------------|---|--|--|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
| Your full name | Owen | | | | |
| | First name | First name | | | |
| Write the name that is on your government-issued | | | | | |
| picture identification (for | Middle name | Middle name | | | |
| example, your driver's | Washington | | | | |
| license or passport | Last name | Last name | | | |
| Bring your picture | Jr | 0.15.40.1.11.110 | | | |
| identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) | | | |
| | | | | | |
| 2. All other names you have used in the last | First name | First name | | | |
| 8 years | THOTHAMO | THOCHAIN | | | |
| _ | Middle name | Middle name | | | |
| Include your married or maiden names. | | | | | |
| maiden names. | Last name | Last name | | | |
| | | | | | |
| | First name | First name | | | |
| | | | | | |
| | Middle name | Middle name | | | |
| | Last name | Last name | | | |
| | Last name | Last name | | | |
| 3. Only the last 4 digits | XXX - XX- 3997 | xxx - xx- | | | |
| of your Social Security number or | | | | | |
| federal Individual | OR | OR | | | |
| Taxpayer Identification number | 9 xx - xx- | 9 xx - xx- | | | |
| (ITIN) | | | | | |

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| Debtor 1 Owen First Name | Washington Middle Name Last Name | Case number (if known) |
|--|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years | Business name | Business name |
| Include trade names and doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 14720 Page Ave Apt 3 | If Debtor 2 lives at a different address: |
| | Number Street | Number Street |
| | Harvey Illinois 60426 City State Zip Code | City State Zip Code |
| | Cook | ā . |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |
| | | |

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| De | ebtor 1 Owen | | Washington | | Case number (if kno | nwn) | |
|-----|---|--|--|---|---|--|---|
| | First Name | Middle Name | Last Name | | | | |
| Pa | Tell the Court Abo | ut Your Bankruptc | y Case | | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | rief description of each, se 32010)). Also, go to the top | | | | iduals Filing for |
| 8. | How you will pay the fee | more details ab cashier's check may pay with a I need to pay the landividuals to F I request that rejudge may, but the official pove you choose this | entire fee when I file my bout how you may pay. To an | rypically, if you attorney is so a pre-printer of you choose stallments (Omay request e your fee, an your family signs the Applic | ou are paying the submitting your ed address. e this option, sig official Form 103 this option only d may do so onl ze and you are u | e fee yourself, you payment on your and attach the AAA). If you are filing for your income it inable to pay the second pay th | a may pay with cash, behalf, your attorney Application for or Chapter 7. By law, a s less than 150% of fee in installments). If |
| 9. | Have you filed for bankruptcy within the last 8 years? | V No. Yes. District District District | | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | | When When | MM / DD / YYYY | Relationship to you Case number, if kno Relationship to you Case number, if kno | own |
| 11. | Do you rent your residence? | ✓ No. G | andlord obtained an evictic Go to line 12. Fill out <i>Initial Statement Abo</i> his bankruptcy petition. | | | st <i>You</i> (Form 101A) a | and file it with |

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Debtor 1 Owen Washington Case number (if known) Middle Name Last Name First Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? Ⅵ I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Owen Washington Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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| Debtor 1 Owen First Name | Wash Middle Name Last N | ington Case number (if kno | own) |
|--|---|---|---|
| | estions for Reporting Purposes | ame | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily con "incurred by an individual prin No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primarily bus money for a business or investing No. Go to line 16c. ✓ Yes. Go to line 17. | nsumer debts? Consumer debts are marily for a personal, family, or house siness debts? Business debts are destinent or through the operation of the wethat are not consumer debts or be | sehold purpose." ebts that you incurred to obtain the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that funds No. | | property is excluded and administrative ured creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| For you I have examined this petition, and I declare under penalty of perjury that the information provided is true correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12 of title 11, United States Code. I understand the relief available under each chapter, and I choose to produnder Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 year both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ Owen Washington Signature of Debtor 1 | | | |
| | Executed on 8/25/2018 MM / DD / YY | Executed | |

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| Debtor 1 Owen | | Washington | Case number (if) | known) |
|--|--------------------------------|------------------------|----------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12 | or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § 3 | 342(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | | | | ules filed with the petition is incorrect. |
| attorney, you do not | • | . , | | · |
| need to file this page. | /s/ Morsheda Hash | em | Date | 8/25/2018 |
| | Signature of Attorney | **** | M | M / DD / YYYY |
| | | | | |
| | | | | |
| | Morsheda Hashem | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | | 2010 | | |
| | 11101 S. Western Ave Street | enue | | |
| | Street | | | |
| | - | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | J, | | | p |
| | Contact phone | 3129130625 | Email address | mhashem@semradlaw.com |
| | | | | |
| | | | | |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your c | ase: | | | |
|---------------------|---------------------------|-------------|----------------------|--|--|
| Debtor 1 | Owen | | Washington | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| | | | (State) | | |
| Case number | | | | | |
| (If known) | | | | | |

| П | Check if this is an |
|---|---------------------|
| | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | Ψ0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$13,300.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$13,300.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | ¢0.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$5,282.00 |
| Your total liabilities | \$5,282.00 |
| Part 3: Summarize Your Income and Expenses | |
| I. Schedule I: Your Income (Official Form 106I) | |
| Copy your combined monthly income from line 12 of Schedule I | \$1,460.56 |
| | |
| . Schedule J: Your Expenses (Official Form 106J) | \$1,310.00 |

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| Debt | or 1 Owen | | Washington | Case number (if known) | | | | |
|---------------|--|--|---|--|------------|--|--|--|
| Part 4 | First Name Answer These Que | Middle Name estions for Administrat | Last Name ive and Statistical Records | S | | | | |
| 6. A ı | Te you filing for bankrupto No. You have nothing to Yes. | | | his form to the court with your other sche | edules. | | | |
| _ | 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | |
| | from the <i>Statement of Yo</i> form 122A-1 Line 11; OR , I | | e: Copy your total current monthorm 122C-1 Line 14. | nly income from Official | \$1,434.03 | | | |
| | Copy the following special From Part 4 on Schedule | - | om Part 4, line 6 of Schedule E | /F: Total claim | | | | |
| | 9a. Domestic support oblig | ations (Copy line 6a.) | | \$0.00 | | | | |
| | 9b. Taxes and certain other | debts you owe the govern | ment. (Copy line 6b.) | \$0.00 | | | | |
| | 9c. Claims for death or pers | sonal injury while you were i | intoxicated. (Copy line 6c.) | \$0.00 | | | | |
| | 9d. Student loans. (Copy li | ne 6f.) | | \$0.00 | | | | |
| | 9e. Obligations arising out priority claims. (Copy line 6 | | or divorce that you did not report | as \$0.00 | | | | |
| | 9f. Debts to pension or pro | fit-sharing plans, and other | similar debts. (Copy line 6h.) | \$0.00 | | | | |

\$0.00

9g. **Total.** Add lines 9a through 9f.

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| Fill in this | information to identify your c | ase: | | | | | |
|--|---|--|--|--|-----------------------------|---|--|
| Debtor 1 | Owen | | | Washington | | | |
| Debtor 2 | First Name | Middle N | ame | Last Name | | | |
| (Spouse, if fil | ing) First Name | Middle N | ame | Last Name | | | |
| United Sta | ites Bankruptcy Court for the: | Northern | [| istrict of Illinois | | | |
| Case num (If known) | ber | | | (State) | | | |
| Officia | l Form 106A/B | | | | | | Check if this is an amended filing |
| Sched | dule A/B: Prope | erty | | | | | 12/1 |
| category v responsibl write your | tegory, separately list and o where you think it fits best. I e for supplying correct infor name and case number (if k Describe Each Residenc | Be as complete ar mation. If more sp known). Answer ev | nd accurate bace is need very question | as possible. If two married ded, attach a separate shee n. | people are et to this fo | e filing together, both a rm. On the top of any a | re equally |
| 1. Do you | own or have any legal or ed | quitable interest i | n any reside | ence, building, land, or simil | lar propert | y? | |
| \checkmark | No. Go to Part 2 | | | | | | |
| 1.1 | Yes. Where is the property? Street address, if available, or | other description | Single- | e property? Check all that app family home or multi-unit building | ply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> <i>ims Secured by Property.</i> |
| | | | Condo Manufa | minium or cooperative actured or mobile home | | Current value of the entire property? | Current value of the portion you own? |
| | Number Street City State | Zip Code | Investration Timesh | nent property are | | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | | one. Debtor Debtor | • | Check | Check if this is co (see instructions) | mmunity property |
| lf vou | own or have more than one, li | st here: | Other info | one of the debtors and anoth rmation you wish to add abo dentification number: | | m, such as local | |
| 1.2 | Street address, if available, or | | Single- Duplex Condo Manufa | e property? Check all that app family home or multi-unit building minium or cooperative actured or mobile home | ply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own? |
| | Number Street City State | Zip Code | Land Investre | nent property are | | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | | one. Debtor Debtor Debtor At least Other info | • | ner | (see instructions) | mmunity property |

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| Debtor 1 | | | mber (if known) |
|-------------------------------|---|---|--|
| | First Name Midd | lle Name Last Name | |
| 1.3 Stre | et address, if available, or other descri | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? |
| Nun | nber Street State Zip Coo | Land Investment property Timeshare Other | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| | | Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this it property identification number: | |
| | the dollar value of the portion you ve attached for Part 1. Write that i | own for all of your entries from Part 1, including any enumber here. | ntries for pages |
| Do you ow you own t | nat someone else drives. If you lease ns, trucks, tractors, sport utility vehicl | e interest in any vehicles, whether they are registered of a vehicle, also report it on Schedule G: Executory Contracts es, motorcycles | • |
| 3.1 | Make Model: Year: | Who has an interest in the property? Checone. Debtor 1 only | k Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. |
| | Approximate mileage: Other information: | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Current value of the entire property? ——————————————————————————————————— |
| 3.2 | Make Model: Year: Approximate mileage: | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | |

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| tor 1 | Owen | Washingtor | n Case numbe | er <i>(if known)</i> | |
|-------|---|--|---|--|--|
| | First Name | Middle Name Last Name | | | |
| 3.3 | Make Model: Year: Approximate mileage: Other information: | one. Debtor 1 only Debtor 2 only Debtor 1 and D At least one of | Debtor 2 only the debtors and another s community property (see | the amount of any secu | claims or exemptions. Pured claims on Schedule ims Secured by Property Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: | Who has an intere one. Debtor 1 only Debtor 2 only | est in the property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert |
| | Other information: | Debtor 1 and D | • | Current value of the entire property? | Current value of the portion you own? |
| | | <u> </u> | the debtors and another | | |
| Exar | mples: Boats, trailers, motors, per | ATVs and other recreational vehic sonal watercraft, fishing vessels, snow | - | | |
| Exar | nples: Boats, trailers, motors, pei No Yes | ATVs and other recreational vehic sonal watercraft, fishing vessels, snow | les, other vehicles, and acco | | |
| Exar | nples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: | ATVs and other recreational vehic sonal watercraft, fishing vessels, snow Who has an intere one. Debtor 1 only Debtor 2 only | les, other vehicles, and accommobiles, motorcycle accessor est in the property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Propert Current value of the |
| Exar | nples: Boats, trailers, motors, per No Yes Make Model: Year: | who has an intere one. Debtor 1 only Debtor 2 only At least one of the content of the content one one. | les, other vehicles, and accommobiles, motorcycle accessor est in the property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert |
| 4.1 | Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Make Model: Year: | who has an interection one. Debtor 1 and D Debtor 1 and D At least one of the instructions) Who has an interection one. Debtor 1 and D At least one of the instructions) Who has an interection one. Debtor 1 only | les, other vehicles, and accommobiles, motorcycle accessor est in the property? Check Debtor 2 only the debtors and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | claims on Schedule control of the portion you own? claims or exemptions. I |
| 4.1 | Make Model: Other information: Make Model: Model: Model: Model: Model: Model: Model: | who has an interection of the content of the conten | est in the property? Check bettor 2 only the debtors and another s community property (see | Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured. | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule in S |

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Debtor 1 Owen Washington Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Living room set, bedroom set \$1500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Cell Phone, 3 TV's, Computer \$1300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, aold, silver No Yes. Describe... Watch, earrings \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3200.00 for Part 3. Write that number here

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Debtor 1 Owen Washington Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$100.00 17.1. Checking account: Chase 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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| Debt | or 1 Owen | | Washington | Case number (if known) | |
|------|--|---|--------------------------------|---------------------------------------|--|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instruments i | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer Issuer name: | checks, promissory notes, | and money orders. | |
| 21. | Retirement or pension Examples: Interests in IF | | , thrift savings accounts, or | other pension or profit-sharing plans | |
| | ✓ No | | | | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | | | |
| | | • | | | |
| | | IRA: | - | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | Examples: Agreements vicompanies, or others No | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | - | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23 | Annuities (A contract fo | or a periodic payment of money to | you either for life or for a n | umber of years) | |
| 20. | ✓ No Yes | Issuer name and description: | you, outloand the or for a fi | difficiency of years) | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debt | or 1 Owen | | Washington | Case number (if known) | |
|------|--|--|-----------------------------------|---|---|
| 0.4 | First Name | Middle Name | Last Name | u o muolifical ototo tuition nuonnom | |
| 24. | | 529A(b), and 529(b)(1). | med ABLE program, or unde | r a qualified state tuition program. | |
| | ✓ No | | | | |
| | Institutio | n name and description. Separately | file the records of any interest | s.11 U.S.C. § 521(c): | |
| | | | | | |
| | | | | | |
| | | | | | |
| 25. | Trusts, equitable or fu | ture interests in property (other | than anything listed in line | 1), and rights or powers | |
| | exercisable for your b | enefit | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | I | | | | |
| 26. | | rademarks, trade secrets, and o ain names, websites, proceeds from | | monte | |
| | - N | air frairies, websites, proceeds fro | in royalites and licensing agree | ments | |
| | ✓ No Yes. Describe | | | | |
| | L reer zeeemeem | | | | |
| 0.7 | Lianna franchisa | | | | |
| 27. | | and other general intangibles nits, exclusive licenses, cooperative | association holdings, liquor li | censes, professional licenses | |
| | No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| Mor | ov or proporty owo | l to you? | | | Current value of the |
| Mor | ney or property owed | l to you? | | | Current value of the portion you own? |
| Mor | ney or property owed | I to you? | | | portion you own? Do not deduct secured |
| | | | | | portion you own? |
| | Tax refunds owed to yo | | | | portion you own? Do not deduct secured |
| | | pu | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed to your No Yes. Give specific in about them, in | formation cluding whether | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| | Tax refunds owed to your No Yes. Give specific in | formation cluding whether d the returns | | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific in about them, in you already file and the tax year. | formation cluding whether d the returns | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific in about them, in you already file and the tax yes | formation cluding whether d the returns ars | ;, child support, maintenance, | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific in about them, in you already file and the tax yes Family support Examples: Past due or lu | formation cluding whether d the returns ars | , child support, maintenance, | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to your No Yes. Give specific in about them, in you already file and the tax yes Family support Examples: Past due or luce. | formation cluding whether d the returns ars mp sum alimony, spousal support | , child support, maintenance, | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific in about them, in you already file and the tax yes Family support Examples: Past due or lu | formation cluding whether d the returns ars mp sum alimony, spousal support | ;, child support, maintenance, | State: Local: divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to your No Yes. Give specific in about them, in you already file and the tax yes Family support Examples: Past due or luce. | formation cluding whether d the returns ars mp sum alimony, spousal support | ;, child support, maintenance, | State: Local: divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t |
| 28. | Tax refunds owed to your No Yes. Give specific in about them, in you already file and the tax yes Family support Examples: Past due or luce. | formation cluding whether d the returns ars mp sum alimony, spousal support | , child support, maintenance, | State: Local: divorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds owed to your No Yes. Give specific in about them, in you already file and the tax yes Family support Examples: Past due or luce. | formation cluding whether d the returns ars mp sum alimony, spousal support | ;, child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to your No Yes. Give specific in about them, in you already file and the tax yes Family support Examples: Past due or luce. | formation cluding whether did the returns ars | ., child support, maintenance, | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to your No Yes. Give specific in about them, in you already file and the tax year. Family support Examples: Past due or lue. No Yes. Give specific in the control of | formation cluding whether id the returns ars | sability benefits, sick pay, vaca | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to your No Yes. Give specific in about them, in you already file and the tax year Family support Examples: Past due or lue No Yes. Give specific in the spe | formation cluding whether d the returns ars mp sum alimony, spousal support formation | sability benefits, sick pay, vaca | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to you ✓ No Yes. Give specific in about them, in you already file and the tax yea Family support Examples: Past due or lu ✓ No Yes. Give specific in the specific in t | formation cluding whether id the returns ars | sability benefits, sick pay, vaca | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to your No Yes. Give specific in about them, in you already file and the tax year Family support Examples: Past due or lue No Yes. Give specific in the spe | formation cluding whether id the returns ars | sability benefits, sick pay, vaca | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | or 1 Owen | Washington | Case number (if known) | |
|------|---|---|---|--|
| | First Name Middle Name | Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; hea | alth savings account (HSA); credit, ho | meowner's, or renter's insurance | |
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died. | | or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | |
| 33. | Claims against third parties, whether or not general Examples: Accidents, employment disputes, insured No. | | demand for payment | |
| | Yes. Describe Anticipated Workers' Con | npensation Settlement | | |
| 34. | \$10000.00 Other contingent and unliquidated claims of to set off claims | every nature, including countercl | aims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not already list | | | |
| | ✓ No Yes. Describe | | | |
| 36. | Add the dollar value of all of your entries fror for Part 4. Write that number here | | . • . | \$10100.00 |
| Part | 5: Describe Any Business-Related Pro | perty You Own or Have an Int | erest In. List any real estate in Part | 1. |
| 37. | Do you own or have any legal or equitable in | terest in any business-related pro- | perty? | |
| | No. Go to Part 6. Yes. Go to line 38. | , | Cu po Do | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions you alro | eady earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, software | , modems, printers, copiers, fax mad | hines, rugs, telephones, desks, chairs, electro | onic devices |
| | ✓ No Yes. Describe | | | |
| | | | | |

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| Deb | tor 1 Owen | | number (if known) | |
|--------|--------------------------------|---|----------------------|---------------------------------------|
| 1.0 | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, e | quipment, supplies you use in business, and tools of your trade | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| | | | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | Ш | | | |
| | | | | |
| 42. | Interests in partnersh | ips or joint ventures | | |
| | ✓ No | | | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | |
| | them | | | - |
| | | | | |
| | | | | |
| 43. | Customer lists, mailing | lists, or other compilations | | |
| | — | · | | |
| | ✓ No | | A)\Q | |
| | Yes. Do your lists i | nclude personally identifiable information (as defined in 11 U.S.C. § 101(41) | 4)) ? | |
| | ☐ No | | | |
| | Yes. Desc | ribe | | |
| | □ | | | |
| 44. | Any business-related | property you did not already list | | |
| | ✓ No | | | |
| | | | | <u> </u> |
| | Yes. Give specific information | | | |
| | | | | |
| | | | | _ |
| | | | | <u> </u> |
| | | | | |
| | | | | |
| | | | | <u> </u> |
| | | | | |
| 45. A | dd the dollar value of a | all of your entries from Part 5, including any entries for pages you have | e attached | |
| for Pa | art 5. Write that number | er here | | |
| | Describe Any F | arm- and Commercial Fishing-Related Property You Own or | Have an Interest In | |
| Part | If you own or have ar | interest in farmland, list it in Part 1. | nave an interest in. | |
| 4.0 | | | | |
| 46. | טט you own or nave a | ny legal or equitable interest in any farm- or commercial fishing-relat | eu property: | Current value of the |
| | ✓ No. Go to Part 7. | | | Current value of the portion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims |
| | | | | or exemptions |
| 47. | Farm animals | and the form of the different | | |
| | Examples: Livestock, p | ouitry, tarm-raised tish | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| 1 | | | | |

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| Debt | or 1 Owen First Name | Middle Name | Washington Last Name | Case number (if known) | |
|--------------|-----------------------------|---------------------------------------|---|------------------------------|--------------|
| 48. | Crops-either growing o | | Last Name | | |
| 40. | | i ilai vesteu | | | |
| | ✓ No Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| 49. | Farm and fishing equip | ment, implements, machinery, fixtu | res, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 50. | Farm and fishing suppli | es, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| - 4 | A | | l | | |
| 51. | Any farm- and commerc | cial fishing-related property you did | not aiready list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 52. Ad | dd the dollar value of all | of your entries from Part 6, includi | ng any entries for pages | vou have attached | |
| | | here | | | |
| | | | | | |
| | | | | | |
| Part 7 | Z. Describe All Pron | perty You Own or Have an Inter | rest in That You Did N | lot List Ahove | |
| | _ | erty of any kind you did not already | | | |
| | | , country club membership | | | |
| | ✓ No | | | | 1 |
| | Yes. Give specific | | | | |
| | information | | | | |
| | l | | | | |
| | | | | | |
| 54. A | dd the dollar value of all | of your entries from Part 7. Write t | hat number here | | .• |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part 8 | List the Totals of | Each Part of this Form | | | |
| 55. F | Part 1: Total real estate, | line 2 | | > | |
| | , | | | | |
| 56. p | oart 2 total vehicles, line | 5 | | | |
| 57. P | art 3: Total personal and | d household items, line 15 | \$3200.00 | | |
| 58. P | art 4: Total financial ass | ets, line 36 | \$10100.00 | | |
| 59. F | Part 5: Total business-re | lated property, line 45 | *************************************** | | |
| | | shing-related property, line 52 | | | |
| | | | | | |
| | Part 7: Total other prope | | | | |
| 62. T | Total personal property. | Add lines 56 through 61 | \$13300.00 | | + \$13300.00 |
| | | | | Copy personal property total | |
| | | | | | \$13300.00 |
| 63. T | otal of all property on So | chedule A/B. Add line 55 + line 62 | | | |

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| Fill i | in this infor | mation to identify your c | ase: | | |
|--|---|---|--|--|--|
| Deb | otor 1 | Owen | | Washington | |
| | | First Name | Middle Name | Last Name | |
| | otor 2 use, if filing) | First Name | Middle Name | Last Name | |
| Unit | ted States B | ankruptcy Court for the: | Northern D | istrict of Illinois | |
| | | amapie, court or me | | (State) | |
| Cas (If kn | e number own) | | | | |
| Of | ficial | Form 106C | | | Check if this is an amended filing |
| Sc | hedul | e C: The Prop | erty You Claim a | s Exempt | 04/16 |
| infor as eaddi For state the tax- | rmation. I xempt. If r itional pag each iten e a specif amount o exempt r | Using the property you more space is needed ges, write your name an of property you classic dollar amount as of any applicable statetirement funds—ma | u listed on Schedule A/B: I fill out and attach to this ind case number (if known) im as exempt, you must sexempt. Alternatively, you utory limit. Some exempt by be unlimited in dollar a | Property (Official Form 106, page as many copies of Pal). specify the amount of the cumay claim the full fair maions—such as those for homount. However, if you claim the full fair maions—such as those for homount. | re equally responsible for supplying correct A/B) as your source, list the property that you claim at 2: Additional Page as necessary. On the top of any exemption you claim. One way of doing so is to arket value of the property being exempted up to ealth aids, rights to receive certain benefits, and aim an exemption of 100% of fair market value the property is determined to exceed that amount, |
| you | r exempti | _ | to the applicable statutor | | , |
| 1. | | | • | en if your spouse is filing with y | ou. |
| | | | deral nonbankruptcy exemp | · · · · · · · · · · · · · · · · · · · | |
| | You | are claiming federal exe | mptions. 11 U.S.C. § 522(b)(2 | 2) | |
| 2. | For any p | roperty you list on Sche | dule A/B that you claim as e | xempt, fill in the information b | pelow. |
| | | cription of the property chedule A/B that lists th | | Amount of the exemption you Check only one box for each e | · |
| | | | Copy the value from Schedule A/B | | |
| | Brief | | | | 735 ILCS 5/12-1001(b) |
| | description | | \$1,500.00 | \$1,500.0 | 0 |
| | | g room set, oom set | | 100% of fair market value | ue, up to any |
| | Line from Schedule | 4/B: 06 | | applicable statutory limit | |
| | Brief | <u> </u> | | | 735 ILCS 5/12-1001(a) |
| | description | | \$300.00 | \$300.00 | |
| | Used Line from | Clothing | | 100% of fair market value | |
| | Schedule / | 4/B:11 | | applicable statutory limit | |
| 3. | (Subject to | o adjustment on 4/01/19 | | 375? cases filed on or after the date or | |

No Yes

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Debtor 1 Owen Washington Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$1,300.00 description: **✓** \$1,300.00 Cell Phone, 3 TV's, 100% of fair market value, up to any Computer applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$100.00 description: $\overline{}$ \$100.00 Watch, earrings 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$100.00 description: $\overline{}$ \$100.00 Checking account, 100% of fair market value, up to any Chase applicable statutory limit Line from Schedule A/B: 17 Brief 820 ILCS 305/21 \$10,000.00 description: $\overline{\mathbf{A}}$ \$10,000.00 **Anticipated Workers'** 100% of fair market value, up to any Compensation

applicable statutory limit

Settlement

33

Line from Schedule A/B:

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| | | | o | | | |
|-----------------|-------------------------------------|-------------------------------|---|-------------------------|---|-----------------------------------|
| Fill in this | information to identify your o | ase: | | | | |
| Debtor 1 | Owen | | Washington | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if fi | First Name | Middle Name | Last Name | | | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case nun | nber | | | | | |
| <u> </u> | | | | | | Check if this is an |
| Offici | al Form 106D | | | | ш | amended filing |
| Sche | dule D: Credit | tors Who Ha | ve Claims Secu | red by Prop | erty | 12/15 |
| more space | | | le are filing together, both are e mber the entries, and attach it t | | | |
| 1. D o a | any creditors have claims | secured by your proper | ty? | | | |
| ~ | No. Check this box and sub | mit this form to the court | with your other schedules. You h | ave nothing else to rep | ort on this form. | |
| | Yes. Fill in all of the information | on below. | | | | |
| Part 1: | List All Secured Claims | | | | | |
| for e | | editor has a particular claim | rred claim, list the creditor separatel, list the other creditors in Part 2. As g to the creditor's name. | | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |

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| Fill i | n this infori | mation to identify your c | ase: | | | | | |
|--------------------------------|---|---|--|---|---|----------------------------|----------------------------------|-------------------------------|
| Deb | tor 1 | Owen | | Washington | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| Deb | | | | | | | | |
| (Spot | use, if filing) | First Name | Middle Name | Last Name | | | | |
| | | ankruptcy Court for the: | Northern | _ District of Illinois (State) | | | | |
| Case (If knd | e number own) | - | | | | | | |
| Off | icial F | orm 106E/F | | | | Che | eck if this is an | n amended filing |
| | | | ditors Who | Have Unse | cured Claims | | | 12/15 |
| Form clain the e know | 106A/B) ans that are entries in the contries i | and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At | cutory Contracts and Une reditors Who Hold Claims | expired Leases (Official Secured by Property. I | . Also list executory contracts Form 106G). Do not include a f more space is needed, copy top of any additional pages, v | ny creditor the Part yo | s with partia ou need, fill i | ally secured t out, number |
| 1. | - | reditors have priority un Go to Part 2. | secured claims against y | ou? | | | | |
| 2. | listed, ider As much a Continuati | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priorit | y and nonpriority amount ding to the creditor's nam particular claim, list the ot | | both priority | and nonprio | rity amounts. |
| | | | | | | Total claim | Priority amount | Nonpriority amount |

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Debtor 1 Owen Washington Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Americash - Bankruptcy \$1,400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a Mkt Square Shop Ctr 180 S Bolingbrook Dr Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Bolingbrook 60440 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify ___ Payday Loan Is the claim subject to offset? No Yes Bank of America \$300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 982236 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated El Paso 79998 Texas Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Bank NSF Fees Other. Specify Is the claim subject to offset? **✓** No Yes City of Chicago - Dep't of Revenue \$3,300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 88292 n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60608 Chicago Illinois City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Parking and red light tickets Is the claim subject to offset? Official Yes 106E/F Schedule E/F: Creditors Who Have Unsecured Claims page 2

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Debtor 1 Owen Washington Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 MERCHANTS CREDIT GUIDE \$147.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 When was the debt incurred? 9/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent 60606 Chicago Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? $\overline{}$ ORIGINAL CREDITOR: MEDICAL No Other. Specify PAYMENT DATA Yes MERCHANTS CREDIT GUIDE \$135.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 When was the debt incurred? 8/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60606 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or

V

Other. Specify

divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar

001 Collection; Collecting for

ORIGINAL CREDITOR: MEDICAL

PAYMENT DATA

At least one of the debtors and another

Is the claim subject to offset?

✓ No

Yes

Check if this claim relates to a community debt

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Debtor 1 Owen Washington Case number (if known) First Name Middle Name Last Name List Others to Be Notified About a Debt That You Already Listed Part 3: Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. HARRIS & HARRIS LTD On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 111 W JACKSON BLVD S-400 Line 4.3 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured CHICAGO Illinois 60604 Last 4 digits of account number City State Zip Code IL Secretary of State On which entry in Part 1 or Part 2 did you list the original creditor? Name 2701 S. Dirksen Parkway Line 4.3 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Springfield Illinois 62723 Last 4 digits of account number

State

Zip Code

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Debtor 1 Owen Washington Case number (if known)
First Name Middle Name Last Name

| 11136140 | The Middle Halle | | | |
|-----------------------------|---|---------|----------------------------|----------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | s for s | tatistical reporting purpo | ses only |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$5,282.00 | |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$5,282.00 | |

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| Debtor 1 | Owen | Washington | |
|---------------------|---------------------------|-------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or comp | pany with whom you have | the contract or lease | State what the contract or lease is for |
|-----|---|-------------------------|-----------------------|---|
| 2.1 | Harrison, Lonnie Name 14720 Page Ave Apt 3 | | | Residential Lease, Debtor is Lessee, Yearly Residential Lease |
| | Number | Street | | |
| | Harvey | Illinois | 60426 | |
| | City | State | Zip Code | |

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| | | DC | realitetit i age z | 19 01 00 |
|--------------------------------------|---|--------------------------------|--|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Owen | | Washington | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States F | Bankruptcy Court for the | e: Northern | District of Illinois | |
| Office States E | diminupley Court for the | o. Notatom | (State) | |
| Case number (If known) | | | | |
| (II KIIOWII) | | | | Check if this is an |
| | | | | amended filing |
| Official | Form 106H | | | |
| | | = | | |
| Schedul | e H: Your Co | debtors | | 12/15 |
| No Yes 2. Within the Idaho, Lou No. | e last 8 years, have yo uisiana, Nevada, New M Go to line 3. Did your spouse, form | lexico, Puerto Rico, Texas, W | perty state or territory? (deshington, and Wisconsin.) | Community property states and territories include Arizona, California, |
| | Name of your spouse | e, former spouse, or legal equ | ivalent | |
| | N | | | |
| | Number Street | | | |
| | City | State | Zip Code | |
| again as a | a codebtor only if that | t person is a guarantor or o | osigner. Make sure you ha | our spouse is filing with you. List the person shown in line 2 ave listed the creditor on Schedule D (Official Form 106D), fule D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| | | _ | | | , | | | | |
|------------------------------|---|---|-----------------------|------------------------|--------------|-----------------|---|----------------|--|
| Fill in this in | nformation to identify | your case: | | | | | | | |
| Debtor 1 | Owen | | Washi | inaton | | | | | |
| Dobtor ! | First Name | Middle Name | Last N | | | Che | ck if this is: | | |
| Debtor 2 | | | | | | | An amended filing | | |
| (Spouse, if filing | g) First Name | Middle Name | Last N | lame | | | _ | | |
| | s Bankruptcy Court for | Northern | _ District of III | | | | A supplement showing post-pe expenses as of the following da | | |
| the: Case numbe | ır | | (8 | State) | | | от р атион и и и и и и и и и и и и и и и и и и | | |
| (If known) | | | | | | į | MM / DD / YYYY | | |
| Official | Form 106I | | | | | | | | |
| Schedu | ıle I: Your In | come | | | | | | 12/1 | |
| spouse. If m number (if k | | l, attach a separate she y question. | | | _ | | not include information ab onal pages, write your nan | - | |
| | ur employment | | Debtor 1 | 1 | | | Debtor 2 | | |
| informat | ion. | Employment status | □ Emple | | | | Employed | | |
| attach a sep information | ve more than one job, separate page with | ,, | | Employed Not Employed | | | ✓ Not Employed | | |
| | on about additional | | V Not 2 | mployou | | | Tot Employed | | |
| employer | | Occupation | - | | | | - - | | |
| | oart time, seasonal, or loyed work. | Employer's name | | | | | <u> </u> | | |
| | on may include student | Employer's address | | | | | | | |
| | maker, if it applies. | | Number St | Number Street | | | Number Street | | |
| | | | | | | | · · | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | City | | State | Zip Code | City State | Zip Code | |
| | | How long employed | | | | | | | |
| | | there? | - | | | | | | |
| Part 2: Gi | ive Details About N | Nonthly Income | | | | | | | |
| | | | | | | . " | | au. | |
| | nonthly income as of t ess you are separated. | the date you file this forr | n. If you have | nothing | to report | tor any line, v | vrite \$0 in the space. Include yo | our non-tiling | |
| If you or you | - | | , combine the | informa | tion for all | employers fo | r that person on the lines belov | v. If you need | |
| more opace | o, ataon a soparate one | ot to this form. | | | For Del | otor 1 | For Debtor 2 or | | |
| 2. List me | onthiv gross wages. sala | ary, and commissions (befo | re all pavroll | 2. | | \$0.00 | non-filing spouse \$299.00 | | |
| deduct | | , calculate what the monthly | | — | | Ψ0.00 | Ψ233.00 | | |
| be. 3. Estima | ite and list monthly over | rtime nav | | 3. | | + \$0.00 | + \$0.00 | | |
| | ate gross income. Add li | | | 3. 4. | | \$0.00 | \$299.00 | | |
| T. Calcul | are gross mounte. Add I | ← III.IC J. | | →. | | Φυ.υυ | Φ∠99.00 | | |

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| Dec | tor 10wen First Name Middle Name | Washingtor Last Name | 1 | Case number | (if | | |
|--|---|-------------------------|-----------|-----------------------|-----------------------------------|-------|-------------------------|
| | riist Name iviidule Name | Last Name | | known) For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| C | opy line 4 here | → | 4. | \$0.00 | \$299.00 | | |
| 5. Li | st all payroll deductions: | | | | | | |
| 5 | a. Tax, Medicare, and Social Security deductions | Ę | 5a. | \$0.00 | \$22.88 | | |
| 5 | b. Mandatory contributions for retirement plans | Ę | 5b. | \$0.00 | \$0.00 | | |
| 5 | c. Voluntary contributions for retirement plans | Ę | 5c. | \$0.00 | \$0.00 | | |
| 5 | d. Required repayments of retirement fund loans | Ę | 5d. | \$0.00 | \$0.00 | | |
| 5 | e. Insurance | Ę | 5e. | \$0.00 | \$0.00 | | |
| 5 | f. Domestic support obligations | Ę | 5f. | \$0.00 | \$0.00 | | |
| 5 | g. Union dues | Ę | 5g. | \$0.00 | \$0.00 | | |
| 5 | h. Other deductions. Specify: | | 5h. + | \$0.00 + | \$0.00 | | |
| 6. A +5h. | dd the payroll deductions. Add lines $5a + 5b + 5c + 5d + 6c + 6$ | 5e +5f + 5g 6 | 6. | \$0.00 | \$22.88 | | |
| 7. C a | alculate total monthly take-home pay. Subtract line 6 from | om line 4. | 7. | \$0.00 | \$276.12 | | |
| 8. L i | st all other income regularly received: | | | | | | |
| 8 | a. Net income from rental property and from operating business, profession, or farm | | | | | | |
| | Attach a statement for each property and business show gross receipts, ordinary and necessary business expense | | | | | | |
| | the total monthly net income. | | За. | \$0.00 | \$0.00 | | |
| 8 | b. Interest and dividends | 8 | 8b. | \$0.00 | \$0.00 | | |
| 8 | c. Family support payments that you, a non-filing spou dependent regularly receive | | | | | | |
| | Include alimony, spousal support, child support, mainte divorce settlement, and property settlement. | | Вс. | \$0.00 | \$0.00 | | |
| 8 | d. Unemployment compensation | 8 | Bd. | \$0.00 | \$0.00 | | |
| 8 | e. Social Security | 8 | Ве. | \$0.00 | \$0.00 | | |
| 8 | if. Other government assistance that you regularly rec- Include cash assistance and the value (if known) of any recash assistance that you receive, such as food stamps (bunder the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income | non- penefits | Bf. | \$196.00 | \$0.00 | | |
| 8 | g. Pension or retirement income | | 8g. | \$0.00 | \$0.00 | | |
| | h. Other monthly income. Specify: Workers Compensation | | 3h. + | \$988.44 + | \$0.00 | | |
| | dd all other income Add lines 8a + 8b + 8c + 8d + 8e + 8 | | 9. | \$1,184.44 | \$0.00 | | |
| | Calculate monthly income. Add line 7 + line 9. add the entries in line 10 for Debtor 1 and Debtor 2 or non- | | 10. | \$1,184.44 + | \$276.12 | = | \$1,460.56 |
| lr fr | State all other regular contributions to the expenses the clude contributions from an unmarried partner, members or relatives. So not include any amounts already included in lines 2-10 or contributions. | of your household | d, your c | ependents, your roomm | | | |
| | Specify: | | | · · | | 11. + | \$0.00 |
| _ | | | | | | | |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies | | | | | | | |
| | | | | | | | Combined monthly income |
| 13. I | Do you expect an increase or decrease within the year No. | after you file th | is form? | • | | | |
| | Yes. Explain: | | | | | | |
| L | 100. Expirain. | | | | | | |

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| | | Docu | ment Page 32 of 80 | | | |
|---------------------------------|---|--|---|------------------------------------|------------------------|---------------------------|
| Fill in this info | rmation to identify y | our case: | | | | |
| Debtor 1 | Owen | | Washington | | | |
| Debtor 2 | First Name | Middle Name | Last Name | Check if this is: | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filin | g | |
| United States I | Bankruptcy Court for | r the: Northern [| District of Illinois (State) | A supplement sh expenses as of the | | petition chapter 13 date: |
| Case number (If known) | | | (Ciate) | MM / DD / YYYY | | |
| Official | Form 106 | SJ | | | | |
| Schedul | le J: Your E | Expenses | | | | 12/15 |
| information. If (if known). Ans | | | | | | |
| 1. Is this a jo | | | | | | |
| ✓ No. G | o to line 2 | | | | | |
| | oes Debtor 2 live i | n a separate household? | | | | |
| Ц., | □ No | | | | | |
| I | | ust file Official Forms 106J-2, <i>Exper</i> | ses for Separate Household of Debte | or 2. | | |
| 2. Do you hav | we dependents? | ✓ No | | | | |
| Do not list I Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depe with you? | endent live |
| _ | penses include of people other | ✓ No | | | | |
| than yourself an | | Yes | | | | |
| dependent | - | - | | | | |
| Part 2: Esti | imate Your Ongo | ing Monthly Expenses | | | | |
| - | of a date after the | our bankruptcy filing date unless y bankruptcy is filed. If this is a sup | | | | |
| | | non-cash government assistance ded it on Sc <i>hedule I: Your Incom</i> e | | | | Your expenses |
| | or home ownersh for the ground or lot. | ip expenses for your residence. In 4. | clude first mortgage payments and | | 4. | \$650.00 |
| If not inc | luded in line 4: | | | | | |
| | estate taxes | | | | 4a | \$0.00 |
| 4b. Prope | erty, homeowner's, c | or renter's insurance | | | 4b. | \$0.00 |

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Owen Washington Case number (if known) Last Name

| First Name | Middle Name | Last Name | | |
|--|--------------------------------------|--|-----|---------------|
| | | | | Your expenses |
| 5. Additional mortgage payment | nts for your residence, such a | s home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | | |
| 6a. Electricity, heat, natural ga | S | | 6a. | \$80.00 |
| 6b. Water, sewer, garbage col | lection | | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Int | ternet, satellite, and cable service | es | 6c. | \$50.00 |
| 6d. Other. Specify: | | | 6d | \$0.00 |
| 7. Food and housekeeping sup | plies | | 7. | \$350.00 |
| 8. Childcare and children's edu | ucation costs | | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cl | eaning | | 9. | \$15.00 |
| 10. Personal care products and | d services | | 10. | \$15.00 |
| 11. Medical and dental expens | es | | 11. | \$0.00 |
| 12. Transportation. Include gas Do not include car payments | | | 12. | \$150.00 |
| 13. Entertainment, clubs, recre | eation, newspapers, magazine | es, and books | 13. | \$0.00 |
| 14. Charitable contributions ar | nd religious donations | | 14. | \$0.00 |
| 15. Insurance. Do not include insurance dedu | ucted from your pay or included | d in lines 4 or 20. | | |
| 15a. Life insurance | | | 15a | \$0.00 |
| 15b. Health insurance | | | 15b | \$0.00 |
| 15c. Vehicle insurance | | | 15c | \$0.00 |
| 15d. Other insurance. Specify | <u>:</u> | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes | deducted from your pay or inclu | uded in lines 4 or 20. | | |
| Specify: | | | 16 | \$0.00 |
| 17. Installment or lease payme | ents: | | | |
| 17a. Car payments for Vehicle | : 1 | | 17a | \$0.00 |
| 17b. Car payments for Vehicle | 2 | | 17b | \$0.00 |
| 17c. Other. Specify: | | | 17c | \$0.00 |
| 17d. Other. Specify: | | | 17d | \$0.00 |
| | maintenance, and support th | nat you did not report as deducted from rm 106l). | 18. | \$0.00 |
| 19. Other payments you make t | o support others who do not | live with you. | | |
| Specify: | | | 19. | \$0.00 |
| 20.Other real property expense | es not included in lines 4 or 5 | of this form or on Schedule I: Your Income. | | |
| 20a. Mortgages on other prop | perty | | 20a | \$0.00 |
| 20b. Real estate taxes. | | | 20b | \$0.00 |
| 20c. Property, homeowner's, | or renter's insurance | | 20c | \$0.00 |
| 20d. Maintenance, repair, and | upkeep expenses. | | 20d | \$0.00 |
| 20e. Homeowner's associatio | n or condominium dues | | 20e | \$0.00 |

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| Debtor 1 | | | | Washington | Case number (if known) | | |
|---|--|--------------------|-----------------------------|--|------------------------|-----|------------|
| | First Name | • | Middle Name | Last Name | | | |
| 21.Other | . Specify: | | | | | 21 | \$0.00 |
| | | | | | | | |
| 22. Calci | ulate you | ır monthly expens | ses. | | | | \$1,310.00 |
| 22a. <i>A</i> | Add lines | 4 through 21. | | | | | \$0.00 |
| 22b. (| Copy line | 22 (monthly exper | nses for Debtor 2), if any, | from Official Form 106J-2 | | | \$1,310.00 |
| 22c. A | Add line 2 | 2a and 22b. The re | esult is your monthly exp | enses. | | 22. | |
| 23.Calcu | late you | r monthly net inc | ome. | | | | |
| 23a. C | Copy line | 12 (your combined | d monthly income) from | Schedule I. | | 23a | \$1,460.56 |
| 23b. Copy your monthly expenses from line 22 above. | | | | | | 23b | \$1,310.00 |
| | , | , , | nses from your monthly i | ncome. | | | \$150.56 |
| - | The result is your monthly net income. | | | | | | |
| 24. Do y o | ou expec | t an increase or o | decrease in your expen | ses within the year after yo | u file this form? | | |
| - | • | | | - | | | |
| | | | | oan within the year or do you nodification to the terms of yo | | | |
| ✓ N | lo | | | | | | |
| | | | | | | | |
| □ ' | 'es | | | | | | |
| | l I | Explain here: | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
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| Fill in this infor | mation to identify your c | ase: | | | | | | | | |
|--|---|-------------|----------------------|------------------------------------|--|--|--|--|--|--|
| Debtor 1 | Owen | | Washington | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | | |
| Debtor 2 | | | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | | | | |
| | | | (State) | | | | | | | |
| Case number (If known) | | | | <u> </u> | | | | | | |
| Official | Form 106De | <u>eC</u> | | Check if this is an amended filing | | | | | | |
| Declarat | Declaration About an Individual Debtor's Schedules | | | | | | | | | |
| If two married | f two married people are filing together, both are equally responsible for supplying correct information. | | | | | | | | | |
| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 J.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | | | | | |
| Part 1: Sign | Below | | | | | | | | | |
| | | | | | | | | | | |

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

✓ No

✓ Yes. Name of person

✓ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

✓ /s/ Owen Washington

Signature of Debtor 1

Date

MM/DD/YYYY

Date

MM/DD/YYYY

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| Fill in this | information to i | dentify your c | ase: | | | | | | | | |
|------------------------|------------------------------|------------------------------|-------------------------------------|------------------|-------------|------------|----------------|-------------|--------------------|--|---------------------------|
| Debtor 1 | Owen | | | Washington | | | | | | | |
| Debtor 2 | First Nam | е | Middle | Name | Last | Name | | | | | |
| (Spouse, if fil | ing) First Nam | е | Middle | Name | Last | Name | | | | | |
| United Sta | ites Bankruptcy | Court for the: | Northern | | District of | Illinois | | | | | |
| Case num (If known) | ber | | | | | (State) | | | | | |
| Offici | al Form | 107 | | | | | | | | | if this is a ed filing |
| Stater | nent of F | inancia | l Affairs f | or Ind | ividua | ls Fil | ing for | Bankru | uptcy | | 04/1 |
| Be as con | nplete and acc | curate as po ace is neede | ssible. If two m d, attach a sep | arried peo | ple are fi | ling tog | ether, both | are equally | responsible for | r supplying correct e your name and c | |
| Part 1: | Give Details A | bout Your | Marital Status | and Whe | re You Li | ived Be | ore | | | | |
| 1. Wha | at is your curre | nt marital sta | itus? | | | | | | | | |
| ✓ | Married Not married | | | | | | | | | | |
| 2. Dur | ing the last 3 v | ears, have vo | u lived anywher | e other tha | n where v | ou live n | ow? | | | | |
| | No Yes. List all of | the places yo | u lived in the las | st 3 years. D | o not inclu | ude whe | re you live no | ow. | | | |
| | Debtor 1: | | | Dates D there | ebtor 1 liv | red I | Debtor 2: | | | Dates Debtor 2 there | lived |
| | | | | | | _ i | Same as | Debtor 1 | | Same as Del | otor 1 |
| | 4415 W Iowa Number Street | | | From _ To _ | | ī - | Number Stree | t | | - From | _ |
| | Chicago City | Illinois State | 60651 Zip Code | | | ī | Dity | State | Zip Code | _ | |
| | | | | | | ı | Same as | Debtor 1 | | Same as Del | otor 1 |
| | Number Street | | | From _ To _ | | ī - | Number Stree | t | | From | - |
| | City | State | Zip Code | | | (| City | State | Zip Code | _ | |
| and to | <i>erritories</i> include | Arizona, Califo | | siana, Nevad | la, New Me | exico, Pue | erto Rico, Tex | | te or territory? (| Community property s n.) | states |

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| First Name Midd | | | | |
|---|---|---|---|---|
| Explain the Sources of Your In | come | | | |
| Did you have any income from employn | nent or from operating a b | usiness during this year or | the two previous calendar | years? |
| Fill in the total amount of income you rece | • | , 01 | a van dan Dahtan 1 | |
| activities. If you are filing a joint case and y | ou have income that you rec | ceive together, list it only once | e under Debtor 1. | |
| No | | | | |
| Yes. Fill in the details. | | | | |
| | Dabband | | Dahtar 0 | |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income | Gross income | Sources of income | Gross income |
| | Check all that apply. | (before deductions and | Check all that apply. | (before deductions |
| | , | exclusions) | | exclusions) |
| | | | | |
| From January 1 of current year until | Wages, commissions, | | Wages, commissions, | |
| the date you filed for bankruptcy: | bonuses, tips | | bonuses, tips | |
| | Operating a | | Operating a | |
| | business | | business | |
| For last calendar year: | ✓ Wages, | \$5000.00 | Wages, | |
| (January 1 to December 31, 2017) YYYY | commissions, bonuses, tips | | commissions, bonuses, tips | |
| | Operating a | | Operating a | |
| | business | | business | |
| E. H. J. L. | ✓ Wages, | \$2000.00 | Wages, | |
| For the color dor woor before that | | | | |
| For the calendar year before that: (January 1 to December 31, 2016) | commissions, | | commissions, | |
| For the calendar year before that: (January 1 to December 31, | commissions, bonuses, tips | | bonuses, tips | |
| id you receive any other income during a clude income regardless of whether that bublic benefit payments; pensions; rental in | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples accome; interest; dividends; m | rious calendar years? of other income are alimony; noney collected from lawsuits | bonuses, tips Operating a business child support; Social Security | |
| id you receive any other income during to be defined by the first serious and the serious and | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples acome; interest; dividends; my tyou received together, list it | rious calendar years? of other income are alimony; noney collected from lawsuits only once under Debtor 1. | bonuses, tips Operating a business child support; Social Security; royalties; and gambling and | |
| id you receive any other income during a joint case and you have income that it is each source and the gross income from | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples acome; interest; dividends; my tyou received together, list it | rious calendar years? of other income are alimony; noney collected from lawsuits only once under Debtor 1. | bonuses, tips Operating a business child support; Social Security; royalties; and gambling and | |
| (January 1 to December 31, | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples acome; interest; dividends; my tyou received together, list it | rious calendar years? of other income are alimony; noney collected from lawsuits only once under Debtor 1. | bonuses, tips Operating a business child support; Social Security; royalties; and gambling and | |
| id you receive any other income during clude income regardless of whether that is ublic benefit payments; pensions; rental ir ing a joint case and you have income that is each source and the gross income from No | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples income; interest; dividends; mt you received together, list it meach source separately. Do | rious calendar years? of other income are alimony; noney collected from lawsuits only once under Debtor 1. | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. | lottery winnings. If you |
| id you receive any other income during clude income regardless of whether that it is benefit payments; pensions; rental irring a joint case and you have income that set each source and the gross income from | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples acome; interest; dividends; my tyou received together, list it my each source separately. Do | rious calendar years? of other income are alimony; noney collected from lawsuits only once under Debtor 1. | bonuses, tips Operating a business child support; Social Security; royalties; and gambling and a listed in line 4. | |
| d you receive any other income during clude income regardless of whether that it is benefit payments; pensions; rental iring a joint case and you have income that it each source and the gross income from | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples income; interest; dividends; mt you received together, list it meach source separately. Do Debtor 1 Sources of income | Gross income from each source (before deductions | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during clude income regardless of whether that it is benefit payments; pensions; rental iring a joint case and you have income that it each source and the gross income from | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples income; interest; dividends; mt you received together, list it meach source separately. Do Debtor 1 Sources of income | Gross income from each source | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro |
| d you receive any other income during clude income regardless of whether that ablic benefit payments; pensions; rental iring a joint case and you have income that at each source and the gross income from | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples income; interest; dividends; mt you received together, list it meach source separately. Do Debtor 1 Sources of income | Gross income from each source (before deductions | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during a joint case and you have income that is teach source and the gross income from No Yes. Fill in the details. | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples neome; interest; dividends; mt you received together, list it meach source separately. Do Debtor 1 Sources of income Describe below. Anticipated Workers' Compensation | Gross income from each source (before deductions) and exclusions) | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during a joint case and you have income that is teach source and the gross income from No Yes. Fill in the details. | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples neome; interest; dividends; mt you received together, list it meach source separately. Do Debtor 1 Sources of income Describe below. Anticipated Workers' Compensation Settlement | Gross income from each source (before deductions | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during clude income regardless of whether that is blic benefit payments; pensions; rental iring a joint case and you have income from No Yes. Fill in the details. | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples neome; interest; dividends; mt you received together, list it meach source separately. Do Debtor 1 Sources of income Describe below. Anticipated Workers' Compensation Settlement Est. YTD Workers | Gross income from each source (before deductions and exclusions) \$10,000.00 | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during clude income regardless of whether that is blic benefit payments; pensions; rental iring a joint case and you have income from No No Yes. Fill in the details. | commissions, bonuses, tips Operating a business g this year or the two previnceme is taxable. Examples acome; interest; dividends; may be a come; interest; dividends; may be a comparately. Do compensately. Do compensation Settlement Est. YTD Workers Compensation | Gross income from each source (before deductions and exclusions) \$10,000.00 | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during clude income regardless of whether that is blic benefit payments; pensions; rental iring a joint case and you have income from No No Yes. Fill in the details. | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples neome; interest; dividends; mt you received together, list it meach source separately. Do Debtor 1 Sources of income Describe below. Anticipated Workers' Compensation Settlement Est. YTD Workers | Gross income from each source (before deductions and exclusions) \$10,000.00 \$7,660.00 \$1,568.00 | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during clude income regardless of whether that is ablic benefit payments; pensions; rental iring a joint case and you have income that set each source and the gross income from No No Yes. Fill in the details. | commissions, bonuses, tips Operating a business g this year or the two previnceme is taxable. Examples acome; interest; dividends; may be a come; interest; dividends; may be a comparately. Do compensately. Do compensation Settlement Est. YTD Workers Compensation | Gross income from each source (before deductions and exclusions) \$10,000.00 \$1,568.00 \$0.00 | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during clude income regardless of whether that a lablic benefit payments; pensions; rental iring a joint case and you have income from No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,2017_) | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples neome; interest; dividends; mt you received together, list it meach source separately. Do Debtor 1 Sources of income Describe below. Anticipated Workers' Compensation Settlement Est. YTD Workers Compensation Est. YTD LINK | Gross income from each source (before deductions and exclusions) \$10,000.00 \$7,660.00 \$0.00 \$0.00 | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during clude income regardless of whether that a lablic benefit payments; pensions; rental iring a joint case and you have income from No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: | commissions, bonuses, tips Operating a business g this year or the two previnceme is taxable. Examples acome; interest; dividends; may be a come; interest; dividends; may be a comparately. Do compensately. Do compensation Settlement Est. YTD Workers Compensation | Gross income from each source (before deductions and exclusions) \$10,000.00 \$7,660.00 \$1,568.00 \$0.00 \$2,352.00 | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |
| d you receive any other income during clude income regardless of whether that in its blic benefit payments; pensions; rental irring a joint case and you have income from the each source and the gross income from No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2017) | commissions, bonuses, tips Operating a business g this year or the two previncome is taxable. Examples neome; interest; dividends; mt you received together, list it meach source separately. Do Debtor 1 Sources of income Describe below. Anticipated Workers' Compensation Settlement Est. YTD Workers Compensation Est. YTD LINK | Gross income from each source (before deductions and exclusions) \$10,000.00 \$7,660.00 \$0.00 \$0.00 | bonuses, tips Operating a business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income fro each source (before deductions |

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Washington Debtor 1 Owen Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors

Other

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| Insider's Name Number Street City State Zip Code Insider's Name Number Street | r 1 Owen | | | shington | Case number | (if known) |
|--|---|---|--|--|---|---|
| Pes. List all payments to an insider. Dates of payment paid | First Name | Middle Nan | ne Last | Name | | |
| Total amount pour paid Dates of payment Dates of payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. | nsiders include your rel corporations of which y gent, including one for such as child support a | atives; any general partnou are an officer, director a business you operate | ers; relatives of any or, person in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | ou are a general partner; securities; and any managing |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? notude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Total amount pount still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code | <u>· </u> | ents to an insider. | | | | |
| Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. Dates of payment paid Total amount paid Amount you still owe Reason for this payment Include creditor's name City State Zip Code Insider's Name Number Street Number Street | _ | | | | | Reason for this payment |
| City State Zip Code Insider's Name Number Street | Insider's Name | | _ | | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Place of payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Insider's Name Number Street Insider's Name Number Street Number Street | Number Street | | _ | | | |
| Number Street City State Zip Code | City S | tate Zip Code | _ | | | |
| City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an nisider. No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street | Insider's Name | | _ | | | |
| Mithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an nisider? No Yes. List all payments that benefited an insider. Dates of payment paid Dates of payment Dates of payment Dates of payment Dates of payment paid Dates of payment Dates of payment paid Dates of payment payment paid Dates of payment payment payment paid Dates of payment payme | Number Street | | _ | | | |
| Yes. List all payments that benefited an insider. Dates of payment Total amount paid Amount you still owe Reason for this payment Include creditor's name | City S | tate Zip Code | _ | | | |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street | nsider? nclude payments on de No | ebts guaranteed or cosig | ned by an insider. nsider. Dates of | Total amount | Amount you | |
| Number Street City State Zip Code Insider's Name Number Street | | | payment | paid | Still Owe | Include creditor's name |
| City State Zip Code Insider's Name Number Street | Insider's Name | | _ | | | |
| Insider's Name Number Street | Number Street | | _ | | | |
| Number Street | City S | tate Zip Code | _ | | | |
| | Insider's Name | | _ | | | |
| City State Zin Code | Number Street | | _ | | | |
| | | toto Zin Codo | - - | | | |

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Debtor 1 Owen Washington Case number (if known) First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | otor 1 Owen | Washington | Case number (if known) | |
|------|---|------------------------------|---|------------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you | | ank or financial institution, set off any amo | ounts from your |
| | ✓ No Yes. Fill in the details. | | | |
| | | | | |
| | | Describe the action the | creditor took Date action was taken | Amount |
| | Creditor's Name | | | |
| | Number Street | | | |
| | | Last 4 digits of account n | umber: XXXX- | |
| | City. Chate 7in Coals | | | |
| 40 | City State Zip Code | | | f and distance a count |
| 12. | Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official | | oossession of an assignee for the benefit o | r creditors, a court- |
| | ✓ No | | | |
| | Yes | | | |
| Part | t 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did | you give any gifts with a to | tal value of more than \$600 per person? | |
| | ✓ No | , , , | | |
| | Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | Number Street | | | |
| | | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| | Owen | Washington Case number (if) | known) | |
|----------|--|---|---|-------------------|
| | First Name Middle Name | Last Name | · - | |
| | | | | |
| . Wit | hin 2 years before you filed for bankruptcy, di | d you give any gifts or contributions with a total val | ue of more than \$600 | to any charity? |
| | l No | | | |
| ✓ | No | | | |
| | Yes. Fill in the details for each gift or contribu | tion. | | |
| | Gifts or contributions to charities | Describe what you contributed | Data you | Value |
| | that total more than \$600 | Describe what you contributed | Date you contributed | value |
| | that total more than \$000 | | Contributed | |
| | | | | |
| | Charity's Name | _ | | |
| | • | | | |
| | | _ | | |
| | Number Street | _ | | |
| | Number Street | | | |
| | 01. 01.1. 71. 01. | _ | | |
| | City State Zip Code | | | |
| | | | | |
| rt 6: | List Certain Losses | | | |
| ✓ | No Yes. Fill in the details. Describe the property you lost and | Describe any insurance coverage for the loss | Date of your | Value of property |
| | how the loss occurred | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | loss | lost |
| | | | | |
| | | | | |
| 7. | List Certain Payments or Transfers | | | |
| | | or credit counseling agencies for services required in you | | |
| | No | of clear courseling agencies for services required in you | , , | |
| | No Yes. Fill in the details. | of clear courseling agencies for services required in you | . , | |
| ۰ | | Description and value of any property transferred | Date payment or transfer | Amount of payment |
| | Yes. Fill in the details. | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm | Description and value of any property | Date payment or transfer | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | Description and value of any property transferred | Date payment or transfer was made | payment |
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| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
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| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code | Description and value of any property transferred | Date payment or transfer was made | payment |

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| ebtor 1 | Owen | | | Washington | Case number <i>(if</i> | known) | |
|----------|--|--------------------------------|-------------------|---|----------------------------|---|------------------------------|
| | First Name | | Middle Name | Last Name | | • | |
| he | | creditors o | or to make payme | ou or anyone else acting on ents to your creditors? on line 16. | your behalf pay or tra | nsfer any property to a | nyone who promised t |
| ✓ | No Yes. Fill in the details | S. | | | | | |
| | | | | Description and value of transferred | any property | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | d | | | | | |
| | Number Street | | | | | | |
| | City S | tate | Zip Code | | | | |
| Inc | d transfers that you hav | sfers and tra e already lis | ansfers made as s | ecurity (such as the granting o | f a security interest or m | nortgage on your proper | ty). Do not include gifts |
| L | Yes. Fill in the details | 5. | | Description and value of transferred | | pe any property or nts received or debts p ange | Date transfer was made |
| | Person Who Received | d Transfer | | | | | |
| | Number Street | | | | | | |
| | City S Person's relationship | tate to you | Zip Code | | | | |
| | Person Who Received | d Transfer | | | | | |
| | Number Street | | | | | | |
| | City S Person's relationship | tate to you | Zip Code | | | | |
| be | thin 10 years before yneficiary? ese are often called ass | | | you transfer any property to | a self-settled trust o | or similar device of whi | ch you are a |
| ✓ | No Yes. Fill in the details | S. | | | | | |
| | | | | Description and value of | of the property transfe | erred | Date transfer was made |
| | Name of trust | | | | | | |

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Washington Debtor 1 Owen Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred Bank of America Checking XXXX-1234 11/2017 \$ -300.00 Person Who Was Paid Savings P.O. Box 25118 Number Street Money market Brokerage Florida 33622 Tampa Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Debtor 1 Owen Washington Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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| Deb | | Owen | . | | Washington | Cas | se number <i>(if</i> | known) | |
|------|------|----------------------------|-----------------|-----------------|-----------------------------|--------------------|----------------------|--|--------------------|
| | | First Name | N | Middle Name | Last Name | | | | |
| 26. | Hav | e you been a party | y in any judici | al or administr | rative proceeding unde | er any environmer | ntal law? In | clude settlements and ord | ers. |
| | | No Yes. Fill in the det | ails. | | | | | | |
| | _ | | | | Court or agency | | Nature o | of the case | Status of the case |
| | | Case title | | | | | | | Pending |
| | | | | | Court Name Number Street | | | | On appeal |
| | | Case number | | | City State | Zip Code | | | Concluded |
| Part | 11: | Give Details Ab | oout Your Bu | | onnections to Any B | · | | | |
| 27. | | | | | | | following c | onnections to any business | s? |
| ۷, | Witi | - | | | ade, profession, or oth | - | _ | • |) i |
| | | A member of | a limited liabi | - | LLC) or limited liability p | | , | | |
| | | A partner in a | - | aging executiv | ve of a corporation | | | | |
| | | An owner of a | at least 5% of | the voting or e | equity securities of a co | orporation | | | |
| | | No. None of the a | | | details below for each | husiness | | | |
| | ш | res. Oricon all the | at apply above | | | ture of the busine | ess | Employer Identification r | |
| | | - · | | | | | | include Social Security n | lumber or IIIN. |
| | | Business Name | | | | | | | |
| | | Number Street | | | Name of accour | ntant or bookkeep | per | Dates business existed | |
| | | City | State | Zip Code | | | | From To | |
| | | | | | | | | | |
| | | | | | Describe the na | ture of the busine | ess | Employer Identification r include Social Security r | |
| | | Business Name | | | | | | EIN: | |
| | | Number Street | | | _ | | | Dates business existed | |
| | | City | State | Zip Code | Name of accour | ntant or bookkeep | oer | From To | |
| | | | | | | | | | |
| | | | | | December the un | | | Formation and a state of the st | |
| | | | | | Describe the na | ture of the busine | 255 | Employer Identification r include Social Security n | |
| | | Business Name | | | _ | | | EIN: | |
| | | Number Street | | | Name of accour | ntant or bookkeep | per | Dates business existed | |
| | | City | State | Zip Code | | | | From To | |
| | | | | | | | | | |

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| Debto | tor 1 Owen | Washington | Case number (if known) |
|-------|---|---|--|
| | First Name Middle Name | Last Name | |
| | Within 2 years before you filed for bankruptcy, did your creditors, or other parties. No Yes. Fill in the details below. | u give a financial statemen | t to anyone about your business? Include all financial institutions, |
| | | Date issued | |
| | News | MM/DD/YYYY | |
| | Name | MINI/DD/ Y Y Y Y | |
| | Number Street | = | |
| | | | |
| | City State Zip Code | = | |
| Part | : 12: Sign Below | | |
| tr | rue and correct. I understand that making a false sta a bankruptcy case can result in fines up to \$250,000, | tement, concealing propert or imprisonment for up to 2 | nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | /s/ Owen Washington Signature of Debtor 1 | | Signature of Debtor 2 |
| | orgination 200000 | | olginataro en 200ten 2 |
| | Date 8/25/2018 | | Date 8/25/2018 |
| D | Did you attach additional pages to Your Statement of | Financial Affairs for Individu | uals Filing for Bankruptcy (Official Form 107)? |
| Ŀ | ▼ No | | , |
| L | Yes | | |
| D | Did you pay or agree to pay someone who is not an at | torney to help you fill out ba | ankruptcy forms? |
| L | √ No | | |
| | Yes. Name of person | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| | | Northern Dist | | |
|----------|---|-------------------------------|--|------------------------------|
| n re | Owen Washington | | Case No. | |
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| [| DISCLOSURE OF | COMPENSATION | ON OF ATTORNEY F | OR DEBTOR |
| comp | pensation paid to me within one | year before the filing of the | tify that I am the attorney for the abo e petition in bankruptcy, or agreed to plation of or in connection w ith the b | be paid to me, for services |
| For le | egal services, I have agreed to ac | cept | | \$3,200.00 |
| Prior | to the filing of this statement I h | nave received | | \$350.00 |
| Balar | nce Due | | | \$2,850.00 |
| 2. The s | source of the compensation paid | I to me was: | | |
| | Debtor | Other (specify | y) | |
| 3. The s | source of the compensation paid | I to me is: | | |
| | ✓ Debtor | Other (specify | y) | |
| | have not agreed to share the ab nembers and associates of my la | | on with any other person unless they | y are |
| └ | | r firm. A copy of the agreer | with a other person or persons who a nent, together with a list of the name | |
| | | | gal service for all aspects of the banking advice to the debtor in determining | |
| k | o. Preparation and filing of any | oetition, schedules, statem | nents of affairs and plan which may b | e required; |
| (| c. Representation of the debtor | at the meeting of creditors | and confirmation hearing, and any a | djourned hearings thereof; |
| C | d. Representation of the debtor | in adversary proceedings a | and other contested bankruptcy matt | ers; |
| 6. By ag | greement with the debtor(s), the | above-disclosed fee does | not include the following services: | |
| | | | | |
| | | CERTIFI | CATION | |
| | / that the foregoing is a complet n this bankruptcy proceedings. | e statement of any agreem | ent or arrangement for payment to m | ne for representation of the |
| | 8/25/2018 | | /s/ Morsheda Hashem | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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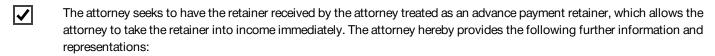
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$3,200.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$343.47
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$2,850.00; and \$33.47 for expenses, leaving a balance due of \$3,193.47
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 8/25/2018 | |
|---------|--------------|------------------------|
| Signed: | | |
| /s/ Owe | n Washington | |
| | | /s/ Morsheda Hashem |
| Debtor(| s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| Washington, Owen | Case No. | |
|--|---|---|
| Debtor(s) | | |
| | Chapter. | Chapter13 |
| VERIFICA | TION OF CREDITOR MAT | TRIX |
| e above named Debtors hereby verify th | nat the attached list of creditors is tr | rue and correct to the best of their |
| 8/25/2018 | /s/ Washington, Washington, Ov Signature of Del | wen |
| | Debtor(s) VERIFICA e above named Debtors hereby verify th | Debtor(s) Chapter. VERIFICATION OF CREDITOR MA e above named Debtors hereby verify that the attached list of creditors is t . 8/25/2018 /s/ Washington, |

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago, IL, 60606

City of Chicago - Dep't of Revenue PO Box 88292 Chicago, IL, 60608

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

IL Secretary of State 2701 S. Dirksen Parkway Springfield, IL, 62723

Bank of America 1701 River Oaks Dr # D Calumet City, IL, 60409

Americash - Bankruptcy 880 Lee Street Suite 302 Des Plaines, IL, 60016 B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Owen Washington | | Case No. | |
|-------------------|---|---|--|-----------------------------------|
| | Debtor | | - | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF | COMPENSATION | OF ATTORNEY F | OR DEBTOR |
| co | mpensation paid to me within or | d Fed. Bankr. P. 2016(b), I certify th ne year before the filing of the petit alf of the debtor(s) in contemplation | ion in bankruptcy, or agreed to | be paid to me, for services |
| Fo | r legal services, I have agreed to | accept | | \$3,200.00 |
| Pri | or to the filing of this statement | I have received | | \$350,00 |
| Ва | lance Due | | | \$2,850.00 |
| 2. Th | e source of the compensation pa | aid to me was: | | · · · · · · · · · · · · · · · · · |
| | ✓ Debtor | Other (specify) | | |
| 3. Th | e source of the compensation pa | aid to me is: | | |
| | ✓ Debtor | Other (specify) | | |
| 4. 🗸 | I have not agreed to share the members and associates of my | above-disclosed compensation wi | h any other person unless the | y are |
| | I have agreed to share the aboumembers or associates of my lithe people sharing in the comp | ve-disclosed compensation with a aw firm. A copy of the agreement, bensation, is attached. | other person or persons who a cogether with a list of the name | are not es of |
| 5. In | return for the above-disclosed fe | ee, I have agreed to render legal ser | vice for all aspects of the bank | ruptcy case, including: |
| | a. Analysis of the debtor's fin bankruptcy; | ancial situation, and rendering adv | ice to the debtor in determinin | g whether to file a petition in |
| | b. Preparation and filing of an | y petition, schedules, statements o | of affairs and plan which may t | oe required; |
| | c. Representation of the debt | or at the meeting of creditors and c | onfirmation hearing, and any | adjourned hearings thereof; |
| | d. Representation of the debt | or in adversary proceedings and ot | her contested bankruptcy mat | ters; |
| 6. By | agreement with the debtor(s), th | ne above-disclosed fee does not in | clude the following services: | |
| | | | | |
| | | CERTIFICATION | DN | |
| l cer debtor(s | tify that the foregoing is a comp) in this bankruptcy proceedings | lete statement of any agreement or 3. | arrangement for payment to r | ne for representation of the |
| | 8/25/2018 | | /s/ Morsheda Hashem | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |



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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- I. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case
 is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in
 this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the
 debtor.
- If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the
 debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the
 attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee
 application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$3,200.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$343.47
- Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$2,850.00; and \$33.47 for expenses, leaving a balance due of \$3,193.47
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 8/25/2018 | |
|---------------------|--------------------------------|
| Signed: | |
| /s/ Owen Washington | |
| auth wahing | /s/ Morsheda Hashem Mashell DH |
| Debtor(s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

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THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Owen Washington,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required to pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Section 3.1, 3.2, or 3.3 (for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may lower that amount that the Firm will receive each month and increase the

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THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

A Chapter 13 plan will be filed on your behalf to repay your creditors. Your Chapter 13 plan payment will be \$150.00 at the time of filing. This monthly Chapter 13 plan payment can be subject to change during your case. Included within this monthly plan payment is the Firm's compensation for representing you during the Chapter 13. You will be paying the Firm an attorney fee of \$3,200.00, with an initial down payment of \$350.00.

Within the Chapter 13 plan payment, you will be paying back your creditors and the Firm's attorney fees:

- 1. The trustee will be paid an estimated 6% of the plan payment.
- 2. The Firm's fees will be paid at approximately \$141.00/mo.
- 3. General Unsecured Creditors will be paid 10% pro-rata after all other creditors.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- A. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- B. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

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THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

One of its Attorneys

Date: 08/25/2018

Accepted:

Owen Washington

WhyZ

Date: 08/25/2018

DISCLAIMER REGARDING STRATUS INTELLIGENCE

Please be advised that some of the partners of this firm have a financial interest in the company, Stralus Intelligence, LLC, that developed and provides to this firm (as well as other firms) the computer software used process its clients' matters. You will not be charged any extra fees or costs as a result of the firm's use of this software as compared to other software. However, as a result of his financial interest in the software company, the interested partners will receive a financial benefit in the range of \$10-15 from the use of this software to process your matter should you determine to retain the firm for your case. The firm does not utilize any other software to process its clients' matters. The firm's use of the software does not impact on the obligations of firm attorneys to exercise independent professional judgment on your behalf with respect to your matter. You are; of course, free to select any counsel of your choice to represent you with respect to your matter.

I have read and understand the above disclaimer.

| Debtor Debtor | AUG 2 5 2018 |
|---------------|---------------------------------------|
| y | Date |
| Debtor | , , , , , , , , , , , , , , , , , , , |
| 8 | Date |

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DISCLOSURE OF AFTER ACQUIRED PROPERTY

I understand and agree that it is my responsibility to disclose any after-acquired property, including, but not limited to, a personal injury lawsuit or inheritance. I further understand if I file a Chapter 13 bankruptcy that the after-acquired property may after the terms of my confirmed Chapter 13 Plan.

| Olient a | Dahingtof | Dafed:_ | AUG | 2 5 | 2018 |
|----------|-----------|---------|-----|-----|------|
| # E | | | | | |
| Clent | | Dated: | | | |

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BANKRUPTCY OVERVIEW VIDEO DISCLAIMER

I have reviewed the Bankruptcy Overview Video and feel I understand all of the information that was covered in the video. I have asked any questions that I might have had regarding the information covered in the video. I also understand that the video is available online for future reference at http://www.debtstoppers.com/bankruptcy/chapter-13/.

| alient Working Ly | Dated: | AUG | 2 5 | 2018 |
|-------------------|--------|-----|-----|------|
| ÷ | | | | 1 |
| Client | Dated: | - | | _ |

CHAPTER 13 DISCLAIMERS

| 1. | I understand that if I owe attorneys fees, those fees will be paid through the Chapter 13 plan and, to the extent allowed by the Bankruptcy Court, The Semrad Law Firm will likely be paid before any of my creditors are paid. |
|-------|--|
| 16 | . <u>0</u> . |
| 2. | I understand that The Semrad Law Firm has pulled a credit report, but that said credit report does not report every debt I owe. I understand that it is my responsibility to provide all my debts to The Semrad Law Firm to list in my bankruptcy, and that failure to list a debt could be grounds for said debt(s) being not discharged in my case. |
| \$125 | |
| 3, | I agree that in the preparation of my bankruptcy petition and schedules that I have disclosed to The Semrad Law Firm all my debts, sources of income, assets, personal property, real estate, transfers of real estate over the past 4 years, and expenses. |
| 9 | 02 |
| 4. | I agree that I will attend my creditors meeting at the time, date and location that will be given to me by The Semrad Law Firm, and also mailed to me by the Bankruptcy Court. That at this meeting I will bring my driver's license or State ID, my social security card, and a recent pay stub if I am working. That failure of me to attend this meeting is grounds for my case to be dismissed. I also understand that failure to bring said requested documents to the meeting can be grounds for the meeting to not be held. |
| | -0ω |
| 5. | I understand that The Semrad Law Firm will be paid first before all creditors unless otherwise agreed or ordered by the court. |
| | 00 |
| 6. | I understand that my first trustee payment is due 30 days after the filing of my bankruptcy case, and every 30 days thereafter. I agree to make my trustee payment every 30 days, and that failure to make my trustee payments is grounds to have my case dismissed. |
| | <u>600</u> |
| 7. | I acknowledge that I have authorized The Semrad Law Firm to submit a payroll control order on my behalf (if applicable) to have my payment deducted from my payroll check each pay period. |

payroll check each pay period.

| | 9 |
|----------------|---|
| 8. | I understand that if a payroll control order is being submitted, that it is unknown when the trustee payments will be deducted out of my paycheck (usually takes one to two months). I also agree to make my Trustee payment directly myself to the Trustee until I see the deductions come out of my paycheck. |
| | |
| 9. | I understand and agree that it is ultimately my responsibility to make my trustee payments each month and monitor my paycheck each pay period to ensure that not only that the deduction is coming out of my paycheck, but also that it is the correct amount. I agree that if for some reason the trustee payment stops coming out of my paycheck, or I leave my job that it is my responsibility to make my trustee payments directly to the Trustee. |
| | |
| 10. | I understand that when making a trustee payment directly to the Trustee, it can only be made by money order or certified check, and that a personal check or cash cannot be sent to the Trustee. |
| | _0 \(\omega \) |
| . H. ., | I agree that I am contributing all the disposable income I have available toward my Chapter 13 plan, and that if my plan is paying my unsecured creditors less than 100%, that the Bankruptcy Trustee can ask that my future tax refunds be tendered to my case while I am in my bankruptcy case. |
| | 00 |
| 12. | I understand that if I want to incur credit such as to finance a car or real estate that I need court permission, and agree that I must contact my attorney to obtain such permission. |
| | ··· _Ow |
| 13. | I understand that I must have filed my federal and state tax returns for the past 4 years if I was legally required to, and failure to have done so is grounds to have my case dismissed. |
| 2 | 00 |
| 14. | I understand that if I am legally required by court order to pay domestic support obligations (child support, alimony), that falling in default is grounds to have my case dismissed and/or not receive a discharge in my case. |

| 15 | I understand that my Chapter 13 plan will run between 36 and 60 months, depending on the amount of debt I have, and what the bankruptcy court requires my plan to run. |
|-----|---|
| | _00 |
| 16. | I understand and agree to complete my 2nd credit counseling exit course before my case ends, and submit a copy of the certificate showing I completed this to my case ends is grounds to not receive my discharge. |
| • | DW |
| 17. | If I have a garnishment coming out of my paycheck, I agree and understand that it is my responsibility to provide my payroll department with proof of my bankruptcy to stop said wage garnishment. It also my responsibility to contact the gamishing creditor and provide them with proof of my filling. |
| | _0,0 |
| 18, | If a garnishment or voluntary deduction is coming out of my bank account, lagree that it is my responsibility to contact my bank to stop said deduction or garnishment by providing proof of bankruptcy, or requesting my bank to close my account and open a new account. |
| 4 | -Ow |
| 19. | I understand that my monthly Trustee payment is not finalized and may increase or decrease due to a difference in my income, expenses, and/or my debt amounts. |
| 20. | I agree that I authorized The Semrad Law Firm to file my bankruptcy case, after I reviewed my bankruptcy petition and schedules. |
| | |
| 21. | I understand that the entire firm of The Semrad Law Firm represents me, and that while a different attorney might have counseled me and prepared my case, that once my case is filed, one of the attorneys at The Semrad Law Firm will be assigned as my attorney for the remainder of my case. |

22. I understand that if I have had (1) bankruptcy dismissed in the last 12 months, that I only have the benefit of the automatic stay for 30 days, until a motion is granted by the judge extending the automatic stay protection for the remainder of the case. That if the Judge denies my motion to extend the automatic stay that it is possible that creditors will still be able to take actions such as foreclosing on my real property, repossessing any vehicles, and garnishing my monies.

DW

23. I understand that if I have had (2) or more bankruptcies dismissed in the last 12 months, that I do not have the benefit of the automatic stay upon the filing of the case, until a motion is granted by the judge imposing the automatic stay protection for the remainder of the case. Until the Judge grants such motion none of my property including my real property, cars or monies are not protected. That if the Judge denies my motion to impose the automatic stay that creditors will still be able to take actions such as foreclosing on my real property, repossessing any vehicles, and garnishing my monies.

00

24. I understand that if I owe any taxing authority such as the IRS or State of Illinois any income tax debt, that even though I am required to put this debt into my Chapter 13 plan, that tax authorities still have the legal right to offset my next tax refund by the amount(s) they are owed.



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| Debtor 1 Owen First Name | Middle Name | Washington Last Name | Case number (ff known) | |
|---|--|--|--|---|
| Share meaning the Co. | estions for Reporting Purpose | s | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily "incurred by an individua No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primarily money for a business or No. Go to line 16c. ✓ Yes. Go to line 17. 16c. State the type of debts y | al primarily for a pers y business debts? <i>I</i> investment or throu | sonal, family, or househ Business debts are debt gh the operation of the | s that you incurred to obtain business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that No. | er 7. Do you estimate t | hat after any exempt prope to distribute to unsecure | perty is excluded and administrative d creditors? |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5 ☐ 5,001-1 ☐ 10,001- | 0,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | | \$10,000 \$50,000 | 001-\$10 million 1,001-\$50 million 1,001-\$100 million 10,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | | \$10,000 \$50,000 | 001-\$10 million 1,001-\$50 million 1,001-\$100 million 10,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| For you | correct. If I have chosen to file under Cof title 11, United States Code under Chapter 7. If no attorney represents me a out this document, I have obtained in the coordance of the coordance o | Chapter 7, I am awar a. I understand the r and I did not pay or a ained and read the n with the chapter of t atement, concealing case can result in fi | e that I may proceed, if e elief available under eac agree to pay someone w otice required by 11 U.S itle 11, United States Co g property, or obtaining | ode, specified in this petition. money or property by fraud in imprisonment for up to 20 years, or |
| | Executed on 8/25/201 | DD/YYYY | Executed o | mmm/DD/YYYY |

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| Debtor 1 | | ase: | الترجيب والمراوا والمراط والمناوس فالبراد | |
|--|---------------------------|---------------------------|--|------------------------------------|
| Depto | Owen | | Washington | |
|) | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| CONTRACTOR STATE OF THE STATE O | | 235.0297.05.0 | AMERICANA CONTRACTOR DATE | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | MONIAL | |
| Official | Form 106De | ec | | Check if this is an amended filing |
| Declarat | tion About an | Individual Deb | tor's Schedules | 12/18 |
| If two married | people are filing togeth | er, both are equally resp | onsible for supplying correct informatio | on. |
| 3.3 | 1341, 1519, and 3571. | | | |
| Part 1: Sig | n Below | eone who is NOT an atto | ney to help you fill out bankruptcy forn | ns? |
| Part 1: Sig | n Below | eone who is NOT an atto | rney to help you fill out bankruptcy form Attach Bankruptcy Petition Preparature (Official Form 119). | |

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| Debtor | Owen | | Washington | Case number (If known) | |
|---|---|-----------------------------|---|--|--|
| 0.0000000000000000000000000000000000000 | First Name | Middle Name | Last Name | | |
| | thin 2 years before y editors, or other part No Yes. Fill in the deta | les. | ou give a financial staten | nent to anyone about your business? Include all financial institutions, | |
| 1000 | 3/ | | Date issued | | |
| | | | _ | _ | |
| | Name | | MM/DD/YYYY | | |
| | Number Street | | _ | | |
| | | | _ | | |
| | City | State Zip Code | | | |
| I hav true a ba | Sign Below | | | | |
| | | | or imprisonment for up to the contract of the | o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 | |
| | Date 8/ | 25/2018 | | Date 8/25/2018 | |
| D:-1 | | | 4 m) | | |
| | | i pages to Your Statement o | T Financial Alfairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? | |
| \checkmark | No | | | | |
| | Yes | | | | |
| Did | you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | | |
| V | No | | | | |
| □ | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| In re: | Washington, Owen | Case No | |
|-------------------|---|--|-------------------------------------|
| 0 | Debtor(s) | Case No. | |
| | | Chapter. | Chapter13 |
| | VERIFICA | TION OF CREDITOR MAT | RIX |
| The knowledge. | e above named Debtors hereby verify the | hat the attached list of creditors is tr | ue and correct to the best of their |
| Date: | 8/25/2018 | /s/ Washington, | owen our woshingt |
| | | Washington, Ov Signature of Del | ven otor |

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| Debte | or 1 Owen First Name | Middle Name | Washington Last Name | Case number ((/ known) | | | | |
|-------|---|--|------------------------------------|--|-------------|--|--|--|
| 16. | Calculate the median family income that applies to you. Follow these steps: | | | | | | | |
| | 16a. Fill in the state in w | | Illinois | | | | | |
| | 16b. Fill in the number of | of people in your household. | 2 | | | | | |
| | 16c. Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go or using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | | \$68,687.00 | | | |
| 17. | How do the lines compare? | | | | | | | |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable Income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3, Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | | | |
| | 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | | | | | | | |
| Part | Calculate Your C | ommitment Period Under | 11 U.S.C. §1325(b)(4 | 1) | | | | |
| 18. | Copy your total averag | e monthly income from line 1 | 1. | | \$1,434.03 | | | |
| 19. | Deduct the marital adjustment if it applies. If you are married, your spouse is not filling with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. | | | | | | | |
| | 19a. If the marital adjust | ment does not apply, fill in 0 on | line 19a. | | -\$0.00 | | | |
| | 19b. Subtract line 19a | from line 18. | | | \$1,434.03 | | | |
| 20. | Calculate your current monthly income for the year. Follow these steps: | | | | | | | |
| | 20a. Copy line 19b. | | | | | | | |
| | Multiply by 12 (the | number of months in a year). | | | x 12 | | | |
| | 20b. The result is your c | urrent monthly income for the ye | ear for this part of the form | • | \$17,208.36 | | | |
| | 20c. Copy the median family income for your state and size of household from line 16c. | | | | | | | |
| | How do the lines compare? | | | | | | | |
| | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | | | | | | | |
| | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. | | | | | | | |
| Part | Sign Below | | | | | | | |
| | By signing here, I do | 6 | at the information on this | statement and in any attachments is true and correct | | | | |
| | Signature of Del | btor 1 | Si Si | gnature of Debtor 2 | | | | |
| | Date 8/25/201 MM/DD/ | | D | MM/DD/YYYYY | | | | |
| | If you checked 17a, If you checked 17b, above. | do NOT fill out or file Form 1224 fill out Form 122C-2 and file it v | C-2. vith this form. On line 39 | of that form, copy your current monthly income from | line 14 | | | |